

17281 U.S. PTO
022004

Atty. Dkt. No. 081583-0294

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richter et al.


Title: ORGANIC
ELECTROLUMINESCENT
DEVICE BASED ON 2,5-
DIAMINOTEREPHTHALIC
ACID DERIVATIVES

Appl. No.: To be determined

Filing Date: To be determined

Examiner: To be determined

Art Unit: To be determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
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Carolyn Simpson	
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(Signature)	

22581 U.S. PTO
10/784149

022004

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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Enclosed are:

- ☒ Specification, Claim(s), and Abstract (112 pages).
- ☒ Informal drawings (1 sheet, Figures 1, 2).
- ☒ Application Data Sheet (37 CFR 1.76) (3 pages).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total	13	-	20	= 0	x		\$18.00	=	\$0.00
Claims:									
Independents	2	-	3	= 0	x		\$86.00	=	\$0.00
:									
If any Multiple Dependent Claim(s) present:					+		\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee					+		\$130.00	=	\$130.00
							SUBTOTAL:	=	\$900.00
<input type="checkbox"/>							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$900.00

☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

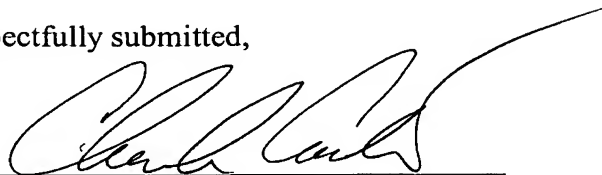
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

FEB. 20, 2004

By



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